

**Adult Family Care Home  
Top Ten Health Deficiency Citations  
Statewide  
July 14, 2011**

**Year Date Range: July 1, 2010 through June 30, 2011**

<b>Rank</b>	<b>Tag</b>	<b>Count</b>	<b>Description</b>
1	F0401	156	Personnel records must include verification of freedom from communicable disease for the AFCH provider, each relief person, each adult household member, and each staff person.
2	F0203	114	Resident records shall contain the Resident Health Assessment, AHCA Form 3110-1023 (AFCH 1110) 1/08, required by Rule 58A-14.0061, 58A-14.0085(1)(a)1. and, 58A-14.007(2).
3	F0609	76	The provider, all staff, each relief person, and all adult household members must meet the Level 1 background screening requirements, or have been exempted from disqualification.
4	F0605	66	The AFCH provider, each relief person, and any person left in sole charge of residents, which may include staff, household members or volunteers, must hold a currently valid card documenting completion of courses in First Aid and CPR.
5	F0301	61	AFCH providers shall maintain on the premises available for agency inspection an up-to-date log listing all residents, and each resident's: a. Date of admission and b. Date of discharge.
6	F0213	60	Resident records shall contain the resident's monthly weight record.
7	F0704	60	A list of currently prescribed medications shall be maintained for all residents who self-administer or who require supervision or assistance with medications.
8	F0204	57	Resident records shall contain a copy of the residency agreement, including a copy of any notices of rate increases sent to the resident or the resident's representative and any addendum.
9	F1202	53	The provider shall at all times maintain first aid and emergency supplies including a 3-day supply of non-perishable food based on the number of residents and household members currently residing in the home, and 2 gallons of drinking water per current resident.
10	F0602	48	The AFCH provider shall annually obtain three (3) hours of continuing education in topics related to the care and treatment of frail elders or disabled adults, or the management and administration of an AFCH.

**Note:** The entire description of each deficiency can be found at [http://ahca.myflorida.com/MCHQ/Current\\_Regs.shtml](http://ahca.myflorida.com/MCHQ/Current_Regs.shtml)

**Ambulatory Surgical Center  
Top Ten Life Safety Deficiency Citations  
Statewide  
July 14, 2011**

**Year Date Range: July 1, 2010 through June 30, 2011**

<b>Rank</b>	<b>Tag</b>	<b>Count</b>	<b>Description</b>
1	K0109	82	Emergency generator maintenance and testing shall meet the standards in NFPA 110 (2002) Chapter 8.
2	K0062	50	Sprinkler systems are maintained, inspected, and tested periodically.
3	K0049	49	All requirements for electrical safety shall be complied with per the NFPA 70, National Electrical Code, and NFPA 99, Health Care Facilities.
4	K0067	43	Air conditioning and ventilation has been installed and maintained to all manufacturers specifications, in accordance with NFPA 101 Life Safety Code (2006) 9.2, 20.5.2, or 21.5.2 & NFPA 90A.
5	K0052	43	The fire alarm system is tested annually. NFPA 101 Life Safety Code (2006) 9.6.1.3; NFPA 72 (National Fire Alarm Code) (2002) Chapter 10.
6	K0046	41	Emergency lighting is provided for 90 minutes.
7	K0130	36	OTHER LSC Standards not in compliance.
8	K0050	33	Quarterly fire drills are conducted on each shift to familiarize staff with signals and emergency actions required under varying conditions, which include: fire, smoke, toxic gas, victim removal, blocked exit, communication procedures, etc.
9	K0116	31	A written, comprehensive emergency management plan for emergency care during an internal or external disaster or emergency, which is reviewed and updated annually, shall be maintained.
10	K0051	30	An electrically supervised fire alarm, which provides emergency forces notification, is available to warn occupants, and operate protective systems shall be provided. NFPA 101 Life Safety Code (2006) 9.6, 20.3.4 or 21.3.4

**Note:** The entire description of each deficiency can be found at [http://ahca.myflorida.com/MCHQ/Current\\_Regs.shtml](http://ahca.myflorida.com/MCHQ/Current_Regs.shtml)

**Assisted Living Facility  
Top Ten Health Deficiency Citations  
Statewide  
July 14, 2011**

**Year Date Range: July 1, 2010 through June 30, 2011**

<b>Rank</b>	<b>Tag</b>	<b>Count</b>	<b>Description</b>
1	A0615	398	The facility must maintain a daily medication observation record (MOR) for each resident who receive assistance with self-administration of medications or medication administration.
2	A1103	369	Freedom from tuberculosis must be documented on an annual basis.
3	A0417	343	The medical examination report shall address the following: 1. The physical and mental status of the resident, including the identification of any health-related problems and functional limitations.
4	A0718	290	The facility will comply with the Resident's Bill of Rights.
5	A0724	290	The use of physical restraints shall be limited to half-bed rails, and only upon the written order of the resident's physician, who shall review the order biannually, and the consent of the resident or the resident's representative.
6	A0700	277	An assisted living facility shall provide care and services appropriate to the needs of residents accepted for admission to the facility.
7	A1115	264	Personnel records contain documentation of compliance with level 1 background screening for all staff subject to screening requirements.
8	A1101	251	Personnel records contain verification of freedom from communicable disease including tuberculosis.
9	A0309	248	The resident's record must include a copy of the resident's contract with the facility, executed at or prior to admission, including any addendums to the contract.
10	A0514	233	All facility staff must receive in-service training regarding the facility's resident elopement response policies and procedures within thirty (30) days of employment.

**Note:** The entire description of each deficiency can be found at [http://ahca.myflorida.com/MCHQ/Current\\_Regs.shtml](http://ahca.myflorida.com/MCHQ/Current_Regs.shtml)

**Birthing Centers**  
**Top Ten Life Safety Deficiency Citations**  
**Statewide**  
**July 14, 2011**  
**Year Date Range: July 1, 2010 through June 30, 2011**

Rank	Tag	Count	Description
1	K0124	3	Electrical, gas, and vacuum systems conform to Code requirements. Electrical and gas equipment conform to Code requirements. NFPA 99 (2002), Chapters 4, 5, 7, & 8, as applicable.
2	K0111	3	Fire alarm, if required, shall be in accordance with NFPA 101(Life safety Code)(2003) Sections 9.6 and 39.3.4.
3	K0129	2	Oxygen is stored in a clean dry place, with no flammable materials, or machinery capable of producing sparks, in the immediate vicinity.
4	K0125	2	The birth center has developed a written disaster plan which covers internal casualty producing incidents, and is rehearsed by personnel at least twice a year
5	K0150	1	The birth center provides fire protection through the elimination of fire hazards, the installation of necessary safeguards, such as fire extinguisher and smoke alarms, to insure rapid and effective fire control
6	K0122	1	Whenever or wherever any device, equipment, system, condition, arrangement, level of protection, or any other feature is required for compliance with the provisions of the Life Safety Code, such device, equipment, system, condition, arrangement, level of protection, or other feature shall thereafter be continuously be maintained in accordance with applicable NFPA requirements.
7	K0121	1	Equipment, requiring periodic testing or operation to ensure it's maintenance, shall be tested as specified elsewhere in the Life Safety Code, or as directed by the authority having jurisdiction. NFPA 101 (2006) 4.6.12.4. Maintenance and testing shall
8	K0119	1	Sprinkler systems are maintained, inspected, and tested periodically.
9	K0106	1	Egress normal illumination and emergency lighting shall be in accordance with NFPA 101(Life safety Code)(2003) Section 7.8-.9 and 39.2.9.
10	K0105	1	Egress capacity, number of exits, travel distance, and discharge shall be in accordance with NFPA 101(Life safety Code)(2003) 39.2.3 through 39.2.7.
11	K0101	1	Mixed occupancies comply with NFPA 101(Life Safety Code)(2006 edition) 6.1.14 & 39.1.2. Combined business occupancy and parking structure shall comply with 39.1.2.2.

**Note:** The entire description of each deficiency can be found at [http://ahca.myflorida.com/MCHQ/Current\\_Regs.shtml](http://ahca.myflorida.com/MCHQ/Current_Regs.shtml)

**Home Health Agency  
Top Ten Health Deficiency Citations  
Statewide  
July 14, 2011**

**Year Date Range: July 1, 2010 through June 30, 2011**

<b>Rank</b>	<b>Tag</b>	<b>Count</b>	<b>Description</b>
1	H0302	133	When required by the provisions of chapter 464; part I, part III, or part V of chapter 468; or chapter 486, the attending physician, physician assistant, or advanced registered nurse practitioner, acting within his or her respective scope of practice, shall establish treatment orders for a patient who is to receive skilled care.
2	G0158	85	Care follows a written plan of care established and periodically reviewed by a doctor of medicine, osteopathy, or podiatric medicine.
3	G0337	71	The comprehensive assessment must include a review of all medications the patient is currently using in order to identify any potential adverse effects and drug reactions.
4	H0306	59	The skilled care services provided by a home health agency, directly or under contract must be supervised and coordinated in accordance with the plan of care.
5	G0159	57	The plan of care developed in consultation with the agency staff covers all pertinent diagnoses.
6	H0320	57	A plan of care shall be established in consultation with the physician, physician assistant, or advanced registered nurse practitioner and the home health agency staff who are involved in providing the care.
7	G0236	55	A clinical record containing pertinent past and current findings in accordance with accepted professional standards is maintained for every patient receiving home health services.
8	H0304	51	Services provided by a home health agency must be covered by an agreement between the home health agency and the patient or the patient's legal representative specifying the home health services to be provided.
9	H0350	49	The home health agency must maintain for each patient who receives skilled care a clinical record that includes pertinent past and current medical, nursing, social and other therapeutic information, the treatment orders, and other such information.
10	H0230	48	A registered nurse shall: 1. be the case manager in all cases involving nursing or both nursing and therapy care. 2. be responsible for the clinical record for each patient receiving nursing care.

**Note:** The entire description of each deficiency can be found at [http://ahca.myflorida.com/MCHQ/Current\\_Regs.shtml](http://ahca.myflorida.com/MCHQ/Current_Regs.shtml)

**Hospital**  
**Top Ten Health Deficiency Citations**  
**Statewide**  
**July 14, 2011**  
**Year Date Range: July 1, 2010 through June 30, 2011**

<b>Rank</b>	<b>Tag</b>	<b>Count</b>	<b>Description</b>
1	H0120	191	The nursing process of assessment, planning, intervention and evaluation shall be documented for each hospitalized patient from admission through discharge.
2	H0029	48	The right to information about patient rights as set forth in section 381.026, F.S., and procedures for initiating, reviewing and resolving patient complaints.
3	H0094	40	Administration of drugs shall be undertaken only upon the orders of authorized members of the professional staff.
4	H0190	39	Each hospital shall maintain a current and complete medical record for every patient seeking care or service.
5	H0022	37	Each hospital shall develop and implement policies and procedures on discharge planning.
6	H0020	32	The hospital shall have policies and procedures to ensure that periodic reassessments of the patient are conducted based on changes in either the patient's condition, diagnosis, or response to treatment.
7	H0119	30	Each hospital shall develop written standards of nursing practice and related policies and procedures to define and describe the scope and conduct of patient care provided by the nursing staff.
8	H0231	26	Each hospital shall develop, implement, and maintain a written preventive maintenance plan, in conjunction with the policies and procedures developed by the infection control committee.
9	H0116	25	Each hospital shall document the relationship of the nursing department to other units of the hospital by an organizational chart, and each nursing department shall have a written organizational plan that delineates lines of authority and accountability.
10	H0199	25	Each hospital shall establish an infection control program involving members of the organized medical staff, the nursing staff, other professional staff as appropriate, and administration.

**Note:** The entire description of each deficiency can be found at [http://ahca.myflorida.com/MCHQ/Current\\_Regs.shtml](http://ahca.myflorida.com/MCHQ/Current_Regs.shtml)

**Hospital**  
**Top Ten Life Safety Deficiency Citations**  
**Statewide**  
**July 14, 2011**  
**Year Date Range: July 1, 2010 through June 30, 2011**

Rank	Tag	Count	Description
1	K0062	132	Sprinkler systems are maintained, inspected, and tested periodically.
2	K0049	109	All requirements for electrical safety shall be complied with per the NFPA 70, National Electrical Code, and NFPA 99, Health Care Facilities.
3	K0076	86	Non-flammable medical gas systems and equipment shall comply with NFPA 99, chapter 8. (Respiratory Therapy).
4	K0067	72	Air conditioning and ventilation has been installed and maintained to all manufacturers specifications, in accordance with NFPA 101 Life Safety Code (2006) 9.2; 18.5.2, 19.5.2 & NFPA 90A (2002).
5	K0021	72	Fire doors complying with 7.2.1 shall be permitted.
6	K0069	65	The design, installation, and use of commercial cooking equipment is in accordance with NFPA 96.
7	K0051	63	An electrically supervised fire alarm, which provides emergency forces notification, is available to warn occupants, and operate protective systems shall be provided.
8	K0018	60	Corridor doors shall be 1 3/4 inch solid bonded wood core doors or they shall have a 20 minute fire resistive rating. If the building or smoke compartment is fully sprinklered, the door shall only resist the passage of smoke.
9	K0109	50	Emergency generator maintenance and testing shall meet the standards in NFPA 101 Life Safety Code (2006) 4.6.12; 9.1.3. NFPA 110 (2005) Chap. 8. 8.3.8,
10	K0050	48	Quarterly fire drills are conducted on each shift to familiarize staff with signals and emergency actions required under varying conditions, which include: fire, smoke, toxic gas, victim removal, blocked exit, communication procedures, etc.

**Note:** The entire description of each deficiency can be found at [http://ahca.myflorida.com/MCHQ/Current\\_Regs.shtml](http://ahca.myflorida.com/MCHQ/Current_Regs.shtml)

**Intermediate Care Facility for the Developmentally Disabled**  
**Top Ten Health Deficiency Citations**  
**Statewide**  
**July 14, 2011**  
**Year Date Range: July 1, 2010 through June 30, 2011**

Rank	Tag	Count	Description
1	W0249	38	As soon as the interdisciplinary team has formulated a client's individual program plan, each client must receive a continuous active treatment program consisting of needed interventions and services.
2	W0369	18	The system for drug administration must assure that all drugs, including those that are self-administered, are administered without error.
3	W0153	17	The facility must ensure that all allegations of mistreatment, neglect or abuse, as well as injuries of unknown source, are reported immediately to the administrator or to other officials in accordance with State law through established procedures.
4	W0159	17	Each client's active treatment program must be integrated, coordinated and monitored by a qualified mental retardation professional.
5	W0368	16	The system for drug administration must assure that all drugs are administered in compliance with the physician's orders.
6	W0322	16	The facility must provide or obtain preventive and general medical care.
7	W0102	16	The facility must ensure that specific governing body and management requirements are met.
8	W0242	15	The individual program plan must include, for those clients who lack them, training in personal skills essential for privacy and independence.
9	W0454	15	The facility must provide a sanitary environment to avoid sources and transmission of infections.
10	W0488	14	The facility must assure that each client eats in a manner consistent with his or her developmental level.

**Note:** The entire description of each deficiency can be found at [http://ahca.myflorida.com/MCHQ/Current\\_Regs.shtml](http://ahca.myflorida.com/MCHQ/Current_Regs.shtml)

**Intermediate Care Facility for the Developmentally Disabled**  
**Top Ten Life Safety Deficiency Citations**  
**Statewide**  
**July 14, 2011**  
**Year Date Range: July 1, 2010 through June 30, 2011**

Rank	Tag	Count	Description
1	K0046	8	Any apartment building with more than twelve living units or greater than three stories shall have emergency lighting in accordance with Section 5-9.
2	K0130	6	Other LSC deficiency not on 2786.
3	K0056	5	Where an automatic sprinkler system is installed for total or partial coverage, the system shall be in accordance with Section 7-7 and 7-6.
4	K0050	5	Fire exit drills shall be conducted twelve times per year, quarterly on each shift. Drills shall involve actual evacuation to a selected assembly point and provide experience in exiting through all exits.
5	K0067	4	Heating, ventilating and air conditioning equipment shall comply with the provisions of Section 7-2.
6	K0018	4	All sleeping room doors shall be provided with latches or other mechanisms suitable for keeping the doors closed. Doors shall be self closing or automatic closing upon detection of smoke.
7	K0051	3	A manual fire alarm system shall be provided in accordance with Section 7-6.
8	K0064	2	Portable fire extinguishers shall be provided near hazardous areas in accordance with Section 7.7.
9	K0029	2	Hazardous areas on the same floor as, and in or abutting a primary means of escape or a sleeping room shall be protected by an enclosure of at least one hour fire rating with self closing or smoke-operated automatic closing fire door
10	K0021	2	Any door in a vertical opening shall have a minimum 20 minute fire rating, be operated by self closers or shall be automatic closing on smoke detection.

**Note:** The entire description of each deficiency can be found at [http://ahca.myflorida.com/MCHQ/Current\\_Regs.shtml](http://ahca.myflorida.com/MCHQ/Current_Regs.shtml)

**Laboratory  
Top Ten Health Deficiency Citations  
Statewide  
July 14, 2011**

**Year Date Range: July 1, 2010 through June 30, 2011**

<b>Rank</b>	<b>Tag</b>	<b>Count</b>	<b>Description</b>
1	L2901	47	The laboratory shall establish and follow written quality control procedures for monitoring and evaluating the quality of the testing process of each method to assure the accuracy and reliability of patient test results and reports in accordance with CLIA regulations.
2	D6000	44	The laboratory must have a director who meets the qualification requirements of §493.1405 of this subpart and provides overall management and direction in accordance with §493.1407 of this subpart.
3	D5217	42	The laboratory must establish and follow written policies and procedures for an ongoing mechanism to monitor, assess, and, when indicated, correct problems identified in the general laboratory systems requirements.
4	L3503	42	Laboratory director responsibilities. The director is responsible for the technical and scientific oversight of the laboratory and must be available to the laboratory to provide supervision as specified in this Rule.
5	D2016	41	Each laboratory performing nonwaived testing must successfully participate in a proficiency testing program approved by CMS.
6	L3111	41	If a laboratory performs tests for which proficiency programs are not available, the laboratory must have a system for verifying the accuracy of its test results at least every six months.
7	L2527	35	Each laboratory must successfully participate in a proficiency testing program that meets the criteria of Rule 59A-7.026 for each specialty, subspecialty, and analyte or test in which the laboratory is licensed.
8	L2909	35	All equipment and supplies shall be in good working order, checked and calibrated for the proper performance of tests and services offered in accordance with this rule and CLIA requirements.
9	L3101	31	Each laboratory must establish and follow written policies and procedures for a comprehensive quality assurance program which is designed to monitor and evaluate the ongoing and overall quality of the total testing process.
10	D5403	27	The procedure manual must include the following when applicable to the test procedure: (1) Requirements for patient preparation; specimen collection, labeling, storage, preservation, transportation, processing, and referral; and criteria for specimen.

**Note:** The entire description of each deficiency can be found at [http://ahca.myflorida.com/MCHQ/Current\\_Regs.shtml](http://ahca.myflorida.com/MCHQ/Current_Regs.shtml)

**Nursing Home  
Top Ten Health Deficiency Citations  
Statewide  
July 14, 2011**

**Year Date Range: July 1, 2010 through June 30, 2011**

<b>Rank</b>	<b>Tag</b>	<b>Count</b>	<b>Description</b>
1	F0371	335	The facility must - (1) Procure food from sources approved or considered satisfactory by Federal, State or local authorities; and (2) Store, prepare, distribute and serve food under sanitary conditions
2	F0441	283	The facility must establish and maintain an infection control program designed to provide a safe, sanitary, and comfortable environment and to prevent the development and transmission of disease and infection.
3	F0329	233	Each resident's drug regimen must be free from unnecessary drugs.
4	F0514	225	The facility must maintain clinical records on each resident in accordance with accepted professional standards and practices that are complete; accurately documented; readily accessible; and systematically organized.
5	F0253	216	The facility must provide housekeeping and maintenance services necessary to maintain a sanitary, orderly, and comfortable interior.
6	F0323	206	The facility must ensure that the resident environment remains as free of accident hazards as is possible; and each resident receives adequate supervision and assistance devices to prevent accidents.
7	F0279	192	A facility must use the results of the assessment to develop, review and revise the resident's comprehensive plan of care.
8	F0431	189	The facility must employ or obtain the services of a licensed pharmacist who establishes a system of records of receipt and disposition of all controlled drugs in sufficient detail to enable an accurate reconciliation.
9	F0282	188	The services provided or arranged by the facility must be provided by qualified persons in accordance with each resident's written plan of care.
10	F0241	179	The facility must promote care for residents in a manner and in an environment that maintains or enhances each resident's dignity and respect in full recognition of his or her individuality.

**Note:** The entire description of each deficiency can be found at [http://ahca.myflorida.com/MCHQ/Current\\_Regs.shtml](http://ahca.myflorida.com/MCHQ/Current_Regs.shtml)

**Nursing Home  
Top Ten Life Safety Deficiency Citations  
Statewide  
July 14, 2011**

**Year Date Range: July 1, 2010 through June 30, 2011**

<b>Rank</b>	<b>Tag</b>	<b>Count</b>	<b>Description</b>
1	K0062	139	Required automatic sprinkler systems are continuously maintained in reliable operating condition and are inspected and tested periodically.
2	K0147	117	Electrical wiring and equipment is in accordance with NFPA 70, National Electrical Code. 9.1.2
3	K0038	81	Exit access is arranged so that exits are readily accessible at all times in accordance with section 7.1.
4	K0018	77	Doors protecting corridor openings in other than required enclosures of vertical openings, exits, or hazardous areas are substantial doors, such as those constructed of 1¾ inch solid-bonded core wood, or capable of resisting fire for at least 20 minutes.
5	K0050	76	Fire drills are held at unexpected times under varying conditions, at least quarterly on each shift.
6	K0076	75	Medical gas storage and administration areas are protected in accordance with NFPA 99, Standards for Health Care Facilities.
7	K0067	74	Heating, ventilating, and air conditioning comply with the provisions of section 9.2 and are installed in accordance with the manufacturer's specifications.
8	K0052	71	A fire alarm system required for life safety is installed, tested, and maintained in accordance with NFPA 70 National Electrical Code and NFPA 72.
9	K0069	62	Cooking facilities are protected in accordance with 9.2.3.
10	K0144	60	Generators are inspected weekly and exercised under load for 30 minutes per month in accordance with NFPA 99. 3.4.4.1.

**Note:** The entire description of each deficiency can be found at [http://ahca.myflorida.com/MCHQ/Current\\_Regs.shtml](http://ahca.myflorida.com/MCHQ/Current_Regs.shtml)